| ORDER FOR SUPPLIES AND SERVICES | | | | IMPORTANT: See instructions in GSAR 553.370- 300-1 for distribution | | PAGE 1 OF 1 PAGE(S) | |
|--|--------------------|----------------------------------|---|--|---|---------------------|--------------------------|
| 1. DATE OF ORDER 09/10/2015 | | 2. ORDER NUMBER GSQ1515IA0003 | | 3. CONTRACT NUMBER GS06F0609Z | | 4. ACT NUMBER | |
| FOR | 1 | | G CLASSIFICATION | | 6. FINANCE DIVISION | | |
| GOVERNMENT USE ONLY | FUND 296X | ORG CODE Q00DB000 | B/A CODE 10 | O/C CODE 25 | AC | SS | VENDOR NAME |
| | FUNC CODE 00 | C/E CODE H08 | PROJ./PROS. NO. | CC-A | MDL | FI | G/L DEBT |
| | W/ITEM | СС-В | PRT./CRFT | | Al | LC | DISCOUNT |
| 7. TO: CONTRACTOR (Name, address and zip code) Dan Nielsen CAELUM RESEARCH CORPORATION 30 W GUDE DR STE 200 ROCKVILLE, MD 208501177 United States 301-424-8205 | | | | | 8. TYPE ORDEF B. DELI | R VERY | REFERENCE YOUR |
| | | | | | Please furnish the following on the terms specified on both sides of the order and the attached sheets, if any, including delivery as indicated. | | |
| | | | | | This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above numbered contract. | | |
| | | | | | NO. 000 TYPE C | | AUTHORITY FOR ISSUING |
| 9A. EMPLOYER'S IDENTIFICATION NUMBER (b) (4) | | | 9B. CHECK, IF APPROP WITHHOLD 20% | | Except as provided herein, all terms and conditions of the original order, as heretofore modified, remain unchanged. | | |
| 10A. CLASSIFICATION Woman Owned Business | | | | | 10B. TYPE OF BUSINESS ORGANIZATION C. Corporation | | |
| 11. ISSUING OFFICE (Address, zip code, and telephone no.) 12. REMITTANCE ADDF (MANDATORY) CAELUM RESEARCH | | | | ESS | 13. SHIP TO (Consignee address, zip code and telephone no.) | | |